



Dental Insurance

Preferred Dentist Program (PPO)

Prepared for: NCFlex

Why are dental benefits so important?

High cost of dental treatments

Benefit of preventive care

Connection between **oral health** and **overall health**



A plan that offers savings, choice and anywhere, anytime service



Negotiated fees typically [30% to 45%] less than the average charges in the same area¹



Flexibility to go to any dentist – **in or out of the network**



Choose from a large network of carefully selected participating dentists



Easy access to pre-treatment estimates, real-time claims processing and 24-hour customer service by phone, fax or online



Plus access to **international dentists in more than 200 countries** through MetLife's International Dental Travel Assistance Program²

“If I need a crown...”*



	Employee A goes in network	Employee B goes out of network
Dentist’s usual charge	\$1,462.00	\$1,462.00
Negotiated fee	\$680.00	N/A
[R&C fee ³	N/A	\$1,451.00
The plan pays	\$340.00	\$725.50
	Employee A pays \$340.00	Employee B pays \$736.50

High Plan Option benefits plan design for NCFlex members

Services Provided	In Network: Percentage of Negotiated Fee	Out Of Network: Percentage of Reasonable & Customary (R&C) ^{3/} Scheduled Amount ⁴
Type A: Preventive Services <ul style="list-style-type: none"> • Exams • X-rays • Fluoride Treatment • Cleanings 	100% Deductible Waived/ No Deductible	100% Deductible Waived/No Deductible

High Plan benefits plan design for NCFlex members

Services Provided	In Network: Percentage of Negotiated Fee	Out Of Network: Percentage of Reasonable & Customary (R&C) ³ / Scheduled Amount ⁴
Type B: Basic Services <ul style="list-style-type: none"> • Most Fillings • Simple Extractions • Root Canal • Sealants 	Services Covered at 80% Deductible Applicable	Services Covered at 80% Deductible Applicable
Type C: Major Services <ul style="list-style-type: none"> • Inlays/Onlays • Crowns • Bridges/Dentures] 	Services Covered at 50% Deductible Applicable	Services Covered at 50% Deductible Applicable
Annual Deductible	\$50 Individual/\$150 Family	\$50 Individual/\$150 Family
Annual Benefits Maximum excluding Orthodontia	\$5,000 per covered person	\$5,000 per covered person

Classic Plan Option benefits plan design for NCFlex members

Services Provided	In Network: Percentage of Negotiated Fee	Out Of Network: Percentage of Reasonable & Customary (R&C) ^{3/} Scheduled Amount ⁴
Type A: Diagnostic/ Preventive Services <ul style="list-style-type: none">• Periodic Exams• X-rays• Fluoride Treatment• Cleanings	100% Deductible Waived/ No Deductible	100% Deductible Waived/No Deductible

Classic Plan Option benefits plan design for NCFlex members

Services Provided	In Network: Set Dollar Amounts	Out Of Network: Percentage of Reasonable & Customary (R&C) ³ / Scheduled Amount ⁴
Type B: Basic Services <ul style="list-style-type: none"> • Most Fillings • Simple Extractions • Sealants 	Services Covered at 60% Deductible Applicable	Services Covered at 60% Deductible Applicable
Type C: Major Services <ul style="list-style-type: none"> • Inlays/Onlays • Crowns • Bridges/Dentures 	Services Covered at 50% Deductible Applicable	Services Covered at 50% Deductible Applicable
Annual Deductible	\$25 Individual/\$75 Family	\$25 Individual/\$75 Family
Annual Benefits Maximum excluding Orthodontia	\$1,500 per Person	\$1,500 per Person



Low Plan Option benefits plan design for NCFlex members

Services Provided	In Network: Percentage of Negotiated Fee	Out Of Network: Percentage of Reasonable & Customary (R&C) ³ / Scheduled Amount ⁴
Type A: Preventive Services <ul style="list-style-type: none">• Exams• X-rays• Fluoride Treatment• Cleanings	100% After Deductible	100% After Deductible

Low Plan benefits plan design for NCFlex members

Services Provided	In Network: Percentage of Negotiated Fee	Out Of Network: Percentage of Reasonable & Customary (R&C) ³ / Scheduled Amount ⁴
Type B: Basic Services <ul style="list-style-type: none"> • Most Fillings • Simple Extractions • Root Canal • Sealants 	Services Covered at 50% Deductible Applicable	Services Covered at 50% Deductible Applicable
Type C: Major Services <ul style="list-style-type: none"> • Inlays/Onlays • Crowns • Bridges/Dentures 	Not Covered	Not Covered
Annual Deductible	\$25 Individual/\$75 Family	\$25 Individual/\$75 Family
Annual Benefits Maximum	\$1,000 per covered Person	\$1,000 per covered Person

Orthodontia – Available under the High and Classic Plan Options only

Services Provided	In Network: Percentage of Negotiated Fee	Out Of Network: Percentage of Reasonable & Customary (R&C) ³ / Scheduled Amount ⁴
Type D: Orthodontia <ul style="list-style-type: none"> • Orthodontic Treatment • Orthodontic Appliances 	Services Covered at 50% after deductible	Services Covered at 50% after deductible
Annual Deductible High Annual Deductible Classic Low – No Ortho coverage	\$50 Individual/\$150 Family \$25 Individual/\$75 Family	\$50 Individual/\$150 Family \$25 Individual/\$75 Family
Orthodontia Lifetime Benefits Maximum	\$1,500 per Child up to age 19	\$1,500 per Child up to age 19

Find a Dental Provider

With MetLife Dental insurance, you can choose from thousands of general dentists and specialists nationwide. You can find the names, addresses, languages spoken and phone numbers of participating dentists by searching our online **Find a Dentist** directory.



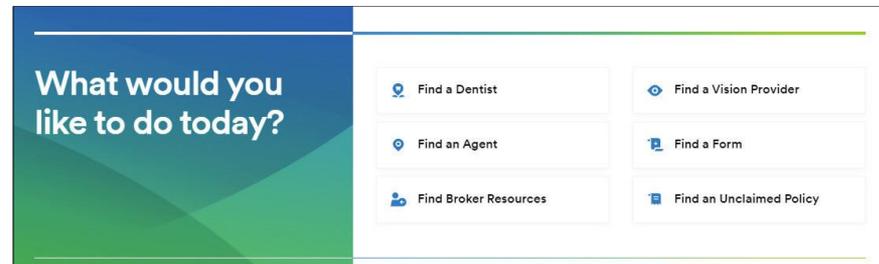
Step 1:

Go to [metlife.com](https://www.metlife.com)



Step 2:

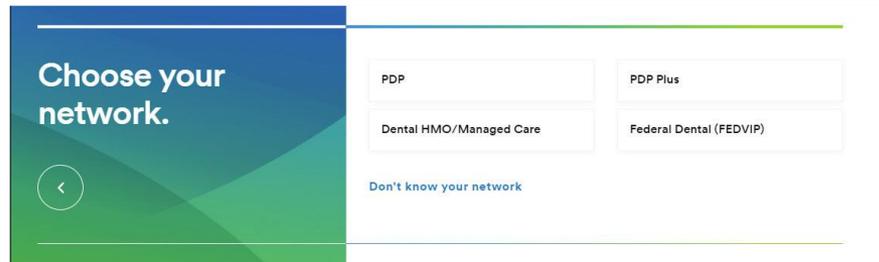
Select "Find a Dentist" next to "What would you like to do today?"



Step 3:

Select "PDP" next to "Choose your network."

Enter your Zip, City or State and select the "Find a Dentist" button. You will then be prompted to select your plan from the list. The plan name is located in your Schedule of Benefits.



Helping you make smarter choices



Oral Health Education made easy

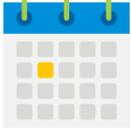
**Dentist Education &
Communication**

**Patient Education &
Communication**



Visit MetLife's Oral Health Library
www.oralfitnesslibrary.com

It's easy to take the first step



2023 Enrollment period 10/10/2022 –10/28/2022



Enroll during your enrollment period



**Please contact your HR representative
for enrollment information**

Creating your own personal safety net

MetLife provides you...

decades of experience in the dental benefits industry

benefits designed with input from dentists and other specialists

a knowledgeable service team

educational tools and resources



So you can...

rest assured that we have the experience to understand what matters most to you

feel confident that you have the coverage you need with a broad network of pre-screened dentists

utilize our services to help you make the most of your benefits

make informed decisions about your benefits and your oral health

After you enroll



[Register with MyBenefits today!
www.metlife.com/mybenefits]



Customer Service Information
Preferred Dentist Program
1-800-942-0854

Footnotes and disclosures

[* Please note: This is a hypothetical example that reviews a crown – porcelain/ceramic substrate (D2740) in the Philadelphia area, zip 19151. It assumes that the annual deductible has been met. Fees in your area may be different.

** Please note that the in-network patient responsibility copayment may not necessarily represent the full extent of your out-of-pocket expense. Where two or more professionally acceptable treatments under generally accepted dental standards exist and where the treatment is a covered service, your MetLife plan bases reimbursement, and your copayment, on the least costly treatment alternative. If a treatment rendered is more costly than the alternative treatment on which your benefit is based, you are responsible for the amounts "including, but not limited to: any deductibles, the copayment for the treatment upon which your benefit was based, and, if your treatment was rendered by an participating provider, the amount by which the scheduled fee for the treatment actually rendered exceeds the scheduled fee for the less costly alternative, and if your treatment was rendered by an out-of-network provider, the amount by which the amount charged by your provider exceeds the scheduled fee for the less costly alternative.

† Not available in all states.

†† Assumes there is no gap in MetLife dental coverage under your employer's plan. Exact timeframes are determined by the employer.

††† MetLife coverage refers to dental plans underwritten or administered by MetLife.

1. Based on internal analysis by MetLife. Negotiated Fees refers to the fees that in-network dentists have agreed to accept as payment in full for covered services, subject to any co-payments, deductibles, cost sharing and benefits maximums. Negotiated fees are subject to change.
2. International Dental Travel Assistance services are administered by AXA Assistance USA, Inc. AXA Assistance USA, Inc. provides dental referral services only. AXA Assistance is not affiliated with MetLife, and the services and benefits they provide are separate and apart from the insurance provided by MetLife. Referral services are not available in all locations.
3. R&C fee refers to the Reasonable and Customary (R&C) charge, which is based on the lowest of (1) the dentist's actual charge, (2) the dentist's usual charge for the same or similar services, or (3) the charge of most dentists in the same geographic area for the same or similar services as determined by MetLife.
4. Reimbursement for out-of-network services is based on the lesser of the dentist's actual fee or the Maximum Allowable Charge (MAC). The out-of-network Maximum Allowable Charge is a scheduled amount determined by MetLife.

Like most group benefit programs, benefit programs offered by MetLife and its affiliates contain certain exclusions, exceptions, limitations, waiting periods, and terms for keeping them in force. Please contact MetLife or your plan administrator for costs and complete details.

Thank you.